

WATCHET URBAN DISTRICT COUNCIL

MEDICAL OFFICER OF HEALTH  
REPORT 1955

*L. H. H.*

In 1955 we had more notified, and probably more actual, Infectious disease than in 1954. There were 23 notified cases of Measles, 1 of Puerperal Pyrexia, 33 of Whooping Cough, 3 of Erysipelas and 1 of Poliomyelitis. Those figures are I should say, fairly accurate so perhaps my cry from the heart for notifications has borne fruit. As far as I was able to observe none of these cases were serious. There were again a number of cases of Chicken-pox, this disease is now notifiable, and you may remember I expressed the hope in my last report that it would be so.

The number of live births was 34 and deaths 28, the corresponding figures for 1954 being 41 and 32; The birth rate per thousand of population being 13.97 death rate 9.11 and for the previous year 16.90 and 10.45. The average rate for Urban Districts in Somerset for 1955 was 14.47 and 11.00 and that for the country as a whole 15.00 and 11.7. So far as births are concerned we are 15 per thousand behind the County Urban rate and 1.3 behind the National rate. May I ask our younger married population to rectify this, although the 1954 figures were unusually large as I had forecast. The death rate was 1.87 per thousand below the County Urban average and 2.59 below the National figure, a very satisfactory record. These figures leave us with a net increase of the population of 4.86 per thousand and I suppose we all like to feel that our own town is doing more than its normal share in keeping up the population. The average age at death was, men 70 and women 69. This is interesting as one is so frequently hearing that men usually die at a younger age than women, and it is indeed a fact, though I have no figures for the whole country that I can give you. As regards individual ages, there were 7 deaths of over 80, 88, 87, 85, 84, 83 and two of 80. The chief cause of death was circulatory disease, that is disease of the heart and, or, the arteries, and in almost every case this was a contributory factor, as one would expect from the average age of death.

There were no deaths directly due to Cancer though in two cases death followed from kidney disease following operation for bowel cancer. There is a good deal of talk nowadays about cancer and a great deal of speculation, much of which is quite wrong. It cannot be attributed entirely to the events and factors of this modern age although they may be contributory. It has been known since ancient times, and may attack almost any kind of life. From the moment the earth began to cool radio activity has been produced and exists everywhere, and is inhaled into the lungs with almost every breath. In this connection it is interesting to hear that if a man is using a Geiger counter in a room and several people come in, the recording will fall to practically nothing, in other words the wandering rays in the atmosphere are inhaled and absorbed by them.

We know that various forms of what are loosely called X rays can be used to ameliorate or destroy Cancer. I am of course leading up to the statement that the extremely small amount of radio-active fall-out from bombs can only be a negligible factor in the cause of Cancer, if a factor at all.

There were no deaths from Tuberculosis. Our infantile mortality rate was 88.23, that seems very high but represents the deaths of three infants under one year, I can only trace one of these cases, a premature baby at 24 weeks which only lived five minutes. The number of vaccinations is again most



unsatisfactory, 14 under the age of one year compared with 12 in the previous year, the number of births being 41 and 34 respectively. Admittedly not quite as bad as in 1954 but still far too small. I have come across some people who have no idea of the purpose of vaccination and others with quite erroneous ideas. 'To make him strong' is not infrequent. I would like to emphasise that it is for the purpose of immunising against small-pox, and the prevention of that horrible disease. In view of the number of people coming home from Egypt and the Middle East and the large numbers of refugees from Central Europe, an outbreak of small-pox is a possibility, although all these people will have to be vaccinated before entering.

The anti-diphtheria immunisation is again not nearly so satisfactory as in the previous year, being 11. under the age of 4 years, compared with 48 in the previous year. I think and hope that some have been done which have not been notified to the County Medical Officer of Health. The number of re-inforcements was 32 compared with 48 in 1954. Whatever the true position it is unsatisfactory and I hope that now, when there is little fear of Polio infection, mothers will have their children done. It is a simple matter and their own Doctor can do it. I have not worked out the actual rate per cent as it is deceptive and must really cover three or four years to have any significance. It is a debatable question as to what is the best way of getting a better proportion of Diphtheria. Immunisation incidentally this is nowadays combined with Whooping Cough immunisation. Nowadays there is such a mass of propaganda that people take little notice of it. Perhaps the best way is for the District Nurses and Health Visitors to urge it verbally on their patients. As regards Whooping Cough you will notice that the figures for 1955 are considerably larger than previously. One M.O.H. a year ago, pointed out to his Council that some children still infectious, were allowed to play outside with others and of course spread the infection. He had found it so bad that he advised his Council that when such cases could be proved, prosecutions should be taken against the parents, it is of course a contravention of the Public Health Law.

The Tuberculosis figures are fairly satisfactory. The numbers in the register were, pulmonary 7 male and 7 female, non pulmonary 2 male and 1 female. The number removed was 2, both females, they left the district. The number of additions was 2, both pulmonary, 1 male and one female both migrants into the district, so that we had no new cases among our own population. The fight against T.B. goes on with slowly increasing success, but in 1955 there were still 6,500 deaths from this disease. In 1938 there were 25,000, figures to give moderate satisfaction but not complacency. It is the treatment which is so much improved but not yet the prevention. The number of new cases diagnosed in 1938 was 40,000 and the number in 1954 almost the same; almost certainly new methods accounted for a good deal of these, in other words there were far more undiagnosed and therefore dangerous cases in 1938. It is estimated that the number of infectors in 1950 was 35,000.

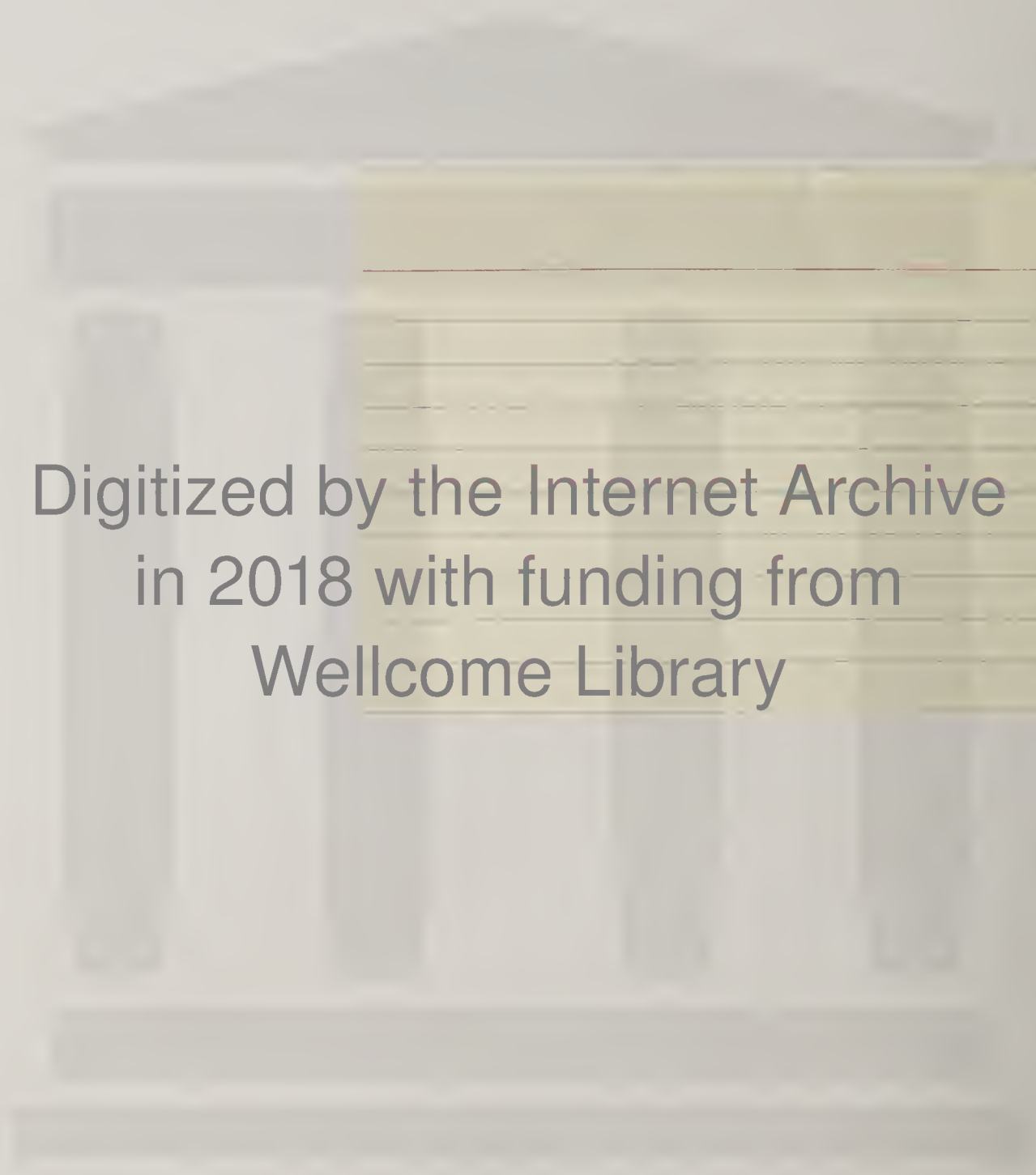
Although it does not come into this formal report, it may be of interest to you to hear of the results of the Mass Radiography, for which I made arrangements, on April 24th last. A total of 698 films was made, of these 17 cases were recalled for further examination. None of these failed to keep their appointments which was very satisfactory. Of these, four were found to be normal, 10 were significant and 3 needed further investigation. The final result was, active T.B. none, under observation 1, inactive 3. Of the non T.B. cases there was 1 case of Bronchiectasis, 1 of bacterial and virus infection, 1 benign tumour, 1 congenital abnormality of the bony thorax and 2 pneumoconiosis.

Samples of water examined during the year were satisfactory

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Mr. Brilliant 5335R

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and the supply was excellent, and we were in a better state during the summer drought than many other places. The results of the Ice Cream examinations were consistently good, nothing below Grade two being notified to me. The caravan sites were again, as we would expect, exemplary. A good deal of illness occurred among the visitors, but this nowadays seems inevitable as many people go away with unwell aged and infirm relatives with them, who should probably not be moved. With modern social economies as they are, this is understandable. I can only repeat my comments last year about housing. There is no serious overcrowding from the medical point of view, but like every other community we always seem to need more. Again I cannot tell you about the testing of milk and other food stuffs, the analysis reports are not now published. There were nothing of medical note in connection with the ports activities, a few cases of a trivial nature, no serious accidents and no introduction of infectious disease.

A M.O.H. Report should not I think consist merely of a number of statistics and facts. It is the only means whereby people's attention can be drawn to various undesirable happenings and advice conveyed to the public. I propose to devote a very few moments to one such subject. I am indebted to the M.O.H. for the London County Council for the following figures which are rather horrifying:-

A fatal accident in this country occurs every half hour.

One third of such happen at home.

More people die from 'home' accidents than from 'road' accidents.

Non-fatal accidents caused some 70,000 a year to need an estimated 1,400,000 days of hospital care.

Four out of five victims of 'home' accidents are elderly people or children under five.

Many of these accidents could be prevented, perhaps one might say most, many are due to falls caused by mats, rugs and carpets, linoleum on floors should not be polished under the rug, do not leave a mat with an edge sticking up out of its well, do not allow rugs to have a fold in them. Check all gas apparatus, give notice of the slightest smell of gas, Gas Boards will willingly assist. Guard all fires, fireguards should be attached to the fireplace not merely stood in front of the fire. I do not think it is generally known that anyone having charge of a child under twelve, commits an offence if that child is killed or seriously injured by being allowed in a room with insufficient protection from fire or heating appliances. Keep handles of pans kettle spouts towards the back of the stove, do not leave hot liquid about and be careful of the heat of bath water. What your hands will stand is almost certainly too hot for a child's, or perhaps your body. Always keep one eye open on very young or very old people. A missing stair rod can easily cause a broken leg, by a wobbly stair carpet. Children inevitably fiddle with things, it is their only way of achieving experience and therefore necessary, so see that they cannot damage themselves in the process.

I will end as usual with my thanks to the District Nurses, those who organise the Home Help Services and our local Ambulance Service and last but not least the Public Health Inspector.

(sgd) MYLES TONKS.

Medical Officer of Health  
Watchet Urban District.

3.12.56.

